# **PATENT**

ED STATES PATENT AND TRADEMARK OFFICE

Docket No.: STREUBEL

In re PATENT Application of: W. STREUBEL & W. CHRISTOPHLIEMKE Examiner: Wilkins III, H. D. **Group Art Unit: 1742** Appl. No: 09/651,431 Filed: August 30, 2000 For: METHOD OF MANUFACTURING A RECEIVED BENDING-RESISTANT TORSIONALLY YIELDING TUBULAR PROFILED MEMBER OCT 2 1 2003 AS A TRANSVERSE SUPPORT etc.

TC 1700

# NOTICE OF APPEAL TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450", on October 14, 2003.

HENRY M. FEIEREISEN

Name of Registered Representative

Date of Signature

SIR:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated July 14, 2003 of the Examiner finally rejecting claims 1, 3, 6, 7, 9 und 12-17.

The items checked below are appropriate:

10/20/2003 MAHMED1 00000042 09651431

01 FC:1401

330.00 DP

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Docket No.: STREUBEL Appl. No.: 09/651,431

1. STATUS OF APPLICANT
This application is on behalf of
(X) other than small entity
() small entity
Verified Statement
() attached
() already filed on

### 2. FEE FOR FILING NOTICE OF APPEAL

Persuant to 37 C.F.R. 1.17(e) the fee for filing the Notice of Appeal is

() small entity

\$165.00

(X) other than a small entity

\$330.00

Notice of Appeal Fee due

\$330.00

#### 3. EXTENSION OF TERM

- a. () The Commissioner is hereby petitioned to extend the period for response to above-referenced Official Action by months until . Accompanying this amendment is the appropriate fee of \$ pursuant to 37 C.F.R. §1.17(c) and 37 C.F.R. §1.136(a).
- b. () Request for Extension of Time was filed on together with a Request for Reconsideration, and the appropriate fee of was paid.

#### 4. TOTAL FEE DUE

The total fee due is

Notice of Appeal fee \$330.00

Extension fee (if any) \$

TOTAL FEE DUE

\$330.00

#### 5. FEE PAYMENT

- (X) Attached is a check in the sum of \$330.00.
- ( ) Please charge the fee to Deposit Account No.06-0502.

Docket No.: STREUBEL Appl. No.: 09/651,431

## 6. FEE DEFICIENCY

(X) The Commissioner is hereby authorized to charge payment of any additional fees which may be required with this communication, or credit any overpayment to Deposit Account No. 06-0502. Two copies of this sheet are provided for this purpose.

Respectfully submitted,

By:

Henry M. Feiereisen Reg/ No.: 31,084 Agent for Applicant

Date: October 14, 2003

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HMF:af